

STATE OF MAINE

SUPERIOR COURT

DISTRICT COURT

\_\_\_\_\_, ss

LOCATION: \_\_\_\_\_

Docket No. \_\_\_\_\_

Docket No. \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

PLAINTIFF'S  DEFENDANT'S  
FINANCIAL STATEMENT  
[M.R.Civ.P. 108(c)]

v.

\_\_\_\_\_  
Defendant

INSTRUCTIONS

This Financial Statement consists of three parts: Part I, General Statement; Part II, Inventory of Assets and Debts; and Part III, Expenses. You must complete Parts I and II. Complete Part III *only* if alimony or attorney fees are involved. In each section, number the items you list. If you need additional space, attach the information, and identify all attachments by completing the information requested below. *If there is a minor child/are minor children involved, check here  and complete a Child Support Affidavit, form FM-050.*

The original of this Financial Statement signed by the party must be filed with the Court and a copy provided to the other party within **21** days of the Family Division Scheduling Order or before mediation, whichever is earlier. See M.R.Civ. P. 108(c). If a party fails to file a Financial Statement as required by the rules, **the Court may make such orders in regard to such failure as are just, including but not limited to imposing sanctions as set forth in M.R.Civ. P. 37(b)(2).**

FINANCIAL STATEMENT

I make this Financial Statement based on my personal knowledge, information and belief. It consists of the following:

- Parts I and II. (Check this box if neither alimony nor attorney fees are involved.)
- III. (Check this box if alimony and/or attorney fees are involved.)

This Financial Statement includes attachments for each of the following sections of Part II:

- A  B  C  D  E  F  G  H  I

and attachments for each of the following sections of Part III:

- A  B1  B2  B3  B4  B5  B6  B7  B8

I have furnished the opposing party a copy of this Financial Statement *and* the following:

- a. A copy of each of the federal income tax returns I have filed for the last two tax years (if I do not have copies to furnish the opposing party, I shall take steps to get them and will furnish them as soon as I receive them), and
- b. A copy of each of the last three pay stubs I have received this year.

This Financial Statement is complete and is based on my personal knowledge, information, and belief, and to the extent it is based on information, I believe such information to be true.

Dated: \_\_\_\_\_

Signature \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Personally appeared the above named  plaintiff  defendant and made oath to the foregoing.

Dated: \_\_\_\_\_

\_\_\_\_\_  
 Notary Public  Attorney

PART I. GENERAL STATEMENT

In this case, the following categories of property and property interests are involved. *(Check all items that apply.)*

- A. Real Estate
- B. Vehicles
- C. Tangible personal property *(Household furniture and furnishings, jewelry, art objects, antiques, tools, recreation equipment, etc.)*
- D. Cash, bank accounts, pensions, and retirement accounts
- E. Stocks, bonds, and other securities
- F. Life and disability insurance
- G. Business interests
- H. Other assets *(Any assets not listed in any other category.)*
- I. Debts *(Personal and business debts, credit card payments, unpaid medical expenses, and other debts whether or not secured by lien or mortgage.)*

**Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.**

**PART II. ASSETS AND DEBTS**

I and/or my spouse own the following property and property interests and owe the following debts. *List all the property and property interests owned, and the debts owed by you and/or your spouse.* If you claim any asset or debt item to be nonmarital, check it in the Nonmarital column and attach a full statement of the facts you rely on to support your claim.

**A. REAL ESTATE.** *List any interest in real estate (land, land and buildings) owned by you or your spouse. If there is a debt secured by the real estate (a mortgage), check in the debt column and list the debt/mortgage in Section I, Debts, on page 4.* If you need more space, check here  and add attachments as necessary.

**\*You must include the Registry of Deeds information (book and page) for the deed to any real estate. You can obtain this information at the Registry of Deeds in the county where the property is located.**

Address of Property	Percent of Ownership	County Recorded Book and Page*	Date Purchased	Current Value	Debt owed on real estate	Non-marital
1.						

**B. VEHICLES.** *List all vehicles (cars, trucks, snowmobiles, ATVs, boats, airplanes, etc.) owned by you or your spouse. Give your best estimate of the current market value, not replacement cost, of each vehicle. Do not deduct debts secured by a vehicle. If there is a debt, check in the debt column and list the debt in Section I, Debts, on page 4.* If you need more space, check here  and add attachments as necessary.

Year, make, model and description of each vehicle	Date Acquired	Current Value	Debt	Non-marital
1.				

**C. TANGIBLE PERSONAL PROPERTY.** *List all items of tangible personal property having a value in excess of \$100 each, giving your best estimate of the current market value, not the replacement cost. Examples are household furniture and furnishings, jewelry, art objects, antiques, tools, recreation equipment, etc. Do not deduct debts secured by any item. If there is a debt, check in the debt column and list the debt in Section I, Debts, on page 4.* If you need more space, check here  and add attachments as necessary.

Description of each item with a value in excess of \$100	Date Acquired	Current Value	Debt	Non-marital
1.				

**Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.**

**D. CASH, BANK ACCOUNTS, PENSIONS, AND RETIREMENT ACCOUNTS.** List cash, all savings and checking accounts, money market accounts, certificates of deposit, profit sharing plans, pension plans, IRAs, Keoughs, annuities, etc. Give current market value of each item. If you need more space, check here  and add attachments as necessary.

Name of Institution	Description of Account	Date Acquired	Account Number	Current Value	Non-marital
1.					

**E. STOCKS, BONDS, AND OTHER SECURITIES.** List all stocks, bonds, warrants, options, debentures, notes, or any other securities. Give your best estimate of the current market value of each item. Do not deduct debts secured by any item. If there is a debt, check in the debt column and list the debt in Section I, Debts, on page 4. If you need more space, check here  and add attachments as necessary.

Name	Description and Number of Units	Date Acquired	Current Value	Debt	Non-marital
1.					

**F. LIFE AND DISABILITY INSURANCE.** Give complete information. Do not deduct debts secured by any item. If there is a debt, check in the debt column and list the debt in Section I, Debts, on page 4. If you need more space, check here  and add attachments as necessary.

Company and Policy Number	Type of Policy	Beneficiary	Death Benefit	Current Cash Surrender Value	Debt	Non-marital
1.						

**G. BUSINESS INTERESTS.** Show any interest in a business. Business includes sole proprietorships, partnerships, professional associates, accounts receivable, inventory, and assets. Give your best estimate of the current market value of the business/assets. If there are debts, check in the debt column, and list the debts in Section I, Debts, on page 4. If you need more space, check here  and add attachments as necessary.

Name of Firm or Company	Extent and Type of Interest	Date Acquired	Current Value	Debt	Non-marital
1.					

Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.

**H. OTHER ASSETS.** List all other property, having a value in excess of \$100 for each item, which has not been listed in any other category above. Give your best estimate of current market value. Examples: any right to sue, lump sum settlement of personal injury, workers compensation, patents, income tax payments or deductions for current year, anticipated income tax refunds, etc. Do not deduct debts secured by any item. If there is a debt, check in the debt column and list the debt in Section I, Debts, below. If you need more space, check here  and add attachments as necessary.

Item	Date Acquired	Current Value	Debt	Non-marital
1.				

**I. DEBTS.** List all personal and business debts, credit card accounts, unpaid medical expenses, and other debts. If the debt is secured by a mortgage, lien, or other security interest on property listed in this Part, write in the "Security" column the section and item number where the property is listed in this Part, e.g., A1, B1, etc. . If you need more space, check here  and add attachments as necessary.

Name and Address of Creditor	Date Incurred	Name of Person(s) Liable	Account Now Owed	Security	Non-marital
1.					

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**PART III. INCOME AND EXPENSES**

This part must be completed in any case which involves alimony and/or attorney fees. If you need additional space, attach separate sheets.

**A. INCOME AND MONEY RECEIVED.** *Include all gross income and other money from all sources, whether taxable or not. Give current actual amount if known. If you do not know or cannot obtain actual amounts, give your best estimate.*

	Use applicable period, either:		
	Weekly	Monthly	Yearly
1. Wages/Self-employment (Show deductions in B1 below)	\$	\$	\$
2. Bonuses	\$	\$	\$
3. Commissions/Tips	\$	\$	\$
4. Unemployment Payments	\$	\$	\$
5. Workers' Compensation/Disability Payments	\$	\$	\$
6. Public Assistance	\$	\$	\$
7. Pensions/Annuities	\$	\$	\$
8. Interest/Dividends/Investment income	\$	\$	\$
9. Partnerships/Trusts/Royalties	\$	\$	\$
10. Rental income	\$	\$	\$
11. Military Reserve/National Guard income	\$	\$	\$
12. Employer furnished benefits (e.g., car, room, insurance)	\$	\$	\$
13. Other (specify)	\$	\$	\$
<b>TOTAL INCOME</b>	\$	\$	\$

**B. EXPENSES AND DEDUCTIONS.** *List all expenses paid and amounts deducted from gross income from wages and self-employment. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.*

**1. DEDUCTIONS FROM WAGES AND SELF-EMPLOYMENT INCOME.**

	Use applicable period, either:		
	Weekly	Monthly	Yearly
	Section and Item No. -		
a) Federal income tax (Number of exemptions _____)	\$	\$	\$
b) State income tax	\$	\$	\$
c) F.I.C.A.	\$	\$	\$
d) Self-employment tax	\$	\$	\$
e) Medical insurance	\$	\$	\$
f) Union dues	\$	\$	\$
g) Payment on loans	\$	\$	\$
h) Savings/Bonds	\$	\$	\$
i) Retirement	\$	\$	\$
j) Support payments/Alimony	\$	\$	\$
k) Other (Specify)	\$	\$	\$
<b>TOTALS</b>	\$	\$	\$

**Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.**

2. **HOUSING EXPENSES.** List all housing expenses. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
 Section and Item No. -|

		\$	\$	\$
a) Mortgage		\$	\$	\$
b) Rent		\$	\$	\$
c) Taxes on residence		\$	\$	\$
d) Home/Furnishings insurance		\$	\$	\$
e) Repairs and maintenance		\$	\$	\$
f) Water and sewer		\$	\$	\$
g) Electricity		\$	\$	\$
h) Heating and cooking fuel/Gas		\$	\$	\$
i) Telephone		\$	\$	\$
j) Cable TV		\$	\$	\$
k) Other (Specify)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

3. **HOUSEHOLD EXPENSES.** List all household expenses. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
 Section and Item No. -|

		\$	\$	\$
a) Groceries		\$	\$	\$
b) Clothing (self and children)		\$	\$	\$
c) Laundry and dry cleaning		\$	\$	\$
d) Toiletries and sundries		\$	\$	\$
e) Grooming		\$	\$	\$
f) General household supplies		\$	\$	\$
g) Other (Specify)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

4. **TRANSPORTATION EXPENSES.** List all your transportation expenses. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
 Section and Item No. -|

		\$	\$	\$
a) Vehicle payments		\$	\$	\$
b) Vehicle insurance		\$	\$	\$
c) License, registration, taxes		\$	\$	\$
d) Maintenance		\$	\$	\$
e) Gasoline, oil, inspections		\$	\$	\$
f) Parking, tolls		\$	\$	\$
g) Other (Specify)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

**Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.**

5. **HEALTH AND MEDICAL EXPENSES.** List all health and medical expenses. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
Section and Item No. -|

a) Doctors		\$	\$	\$
b) Hospital expenses		\$	\$	\$
c) Dentists/Orthodontist		\$	\$	\$
d) Therapist		\$	\$	\$
e) Medical/Dental insurance		\$	\$	\$
f) Prescriptions		\$	\$	\$
g) Other (Specify)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

6. **CREDIT CARD, CHARGE ACCOUNT, AND LOAN PAYMENTS.** List all credit card, charge account, and loan payments. Show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
Section and Item No. -|

a)		\$	\$	\$
b)		\$	\$	\$
c)		\$	\$	\$
d)		\$	\$	\$
e)		\$	\$	\$
f)		\$	\$	\$
g)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

7. **MISCELLANEOUS EXPENSES.** List all miscellaneous expenses. If any payment you list is a payment on a debt, show the section and item number where that debt is listed in Part II, Section I, Debts, on page 4.

Use applicable period, either:                      Weekly                      Monthly                      Yearly  
Section and Item No. -|

a) Life insurance premiums		\$	\$	\$
b) Entertainment/Recreation		\$	\$	\$
c) Vacation expenses		\$	\$	\$
d) Child care expenses		\$	\$	\$
e) Support/Alimony payments		\$	\$	\$
f) Newspapers/Periodicals		\$	\$	\$
g) Other (Specify)		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$

8. **OTHER EXPENSES NOT LISTED ELSEWHERE ON THIS FORM.** If you have other expenses, e.g., allowances for children, gifts, charities, etc., check here  and list them on an attachment.

**Important Notice**

This Financial Statement must be updated and the updated statement filed with the court 7 days before trial. M.R.Civ.P. 108(d)(4).

**Pursuant to M.R.Civ.P. 108(d)(3), the information on this form is not subject to public inspection.**